



LICENSE APPLICATION TUTORIAL



Virginia Alcoholic Beverage
Control Authority

NOTE: Screen shots can be accessed by clicking the links in the instructions. Additional steps not listed below are required for certain banquet applications.

INSTRUCTIONS

Helpful TIPS:

- For optimal performance when using the VAL system, we recommend Google Chrome or Microsoft Edge. Please know that VAL is not compatible with Safari or mobile devices.
- If you are not sure which License you need to apply for, use the online Wizard. The Wizard will display the recommended License, how long the application and ABC processing may take, and the list of required documents.
- You should tab in and out of formatted fields such as FEIN, social security numbers, phone numbers and date of birth to avoid getting an error message. The dashes must be entered in the social security field.
- FEIN number is mandatory when applying for a license or a permit.
- Fields with asterisks are required. Any field that has a question mark inside a circle gives additional information about that field.
- Some screens require you to scroll down to continue the application.
- If you do not have an account, refer to the "Create an Account" video tutorial.

[Apply for a Privilege](#)

[Add a Business Entity](#)

[Add an Individual Entity](#)

[Submit an Application](#)

Apply for a Privilege

1. Log in to Account Central, then the Licensing system will be displayed.
2. Select [Create>Create Application](#).
3. Click the checkbox to accept the [General Disclaimer](#). Click **Continue Application**.
4. Click [Licenses>Apply for a Privilege](#). Click **Continue Application**.
5. Select an application type from one of the categories on the [License Information>Available Applications](#) page (Retail, Industry, Importer and Wholesaler, Internet Retailer). Click **Continue Application**.
6. If applicable, make a selection on the [License Information>Shipper Applications](#) page. Click **Continue Application**.
7. Select a response on the [License Information>COOP](#) page. Click **Continue Application**.
8. Enter required fields in the **Address** section of the [License Information>Business Location](#) page. Click **Continue Application**.
9. Click **Add New** in the **Business Entity** section of the [Contact Information>Business Contact Details](#) page.
10. Enter required fields for the business entity on the [Contact Information](#) page. Scroll down and click **Add Contact Address**.
11. Select **Address Type>Mailing** on the [Contact Address Information](#) page. Enter required fields for the business entity. Click **Save and Close**, then click **Continue Application**.

12. Click **Add New** in the **Contact** section of the [Contact Information>Business Contact Details](#) page.
13. Select **Individual** and enter required fields on the [Contact Information](#) page. Scroll down and click **Add Contact Address**.
14. Select **Address Type>Mailing** on the [Contact Address Information](#) page. Enter required fields for the individual contact. Click **Save and Close**, then click **Continue Application**.
15. Scroll down and click **Continue Application** on the [Contact Information>Business Contact Details](#) page.
16. Click **Add a Row** on the [Contact Information>Entity Hierarchy](#) page.
17. Select **Type>Individual** on the [Entity Relationships](#) page. Enter required fields. Click **Submit**.
18. Click **Continue Application** on the **Contact Information>Entity Hierarchy** page.
19. Review information on the [Review](#) page. Click **Continue Application**.
20. Click **Open** beside the first form listed on the [Associated Forms](#) page. Proceed to one of the following sections based on the forms listed.

Business Entity Form	Add a Business Entity
Individual Entity Form	Add an Individual Entity
Application	Submit an Application

Add a Business Entity

1. Click **Open** beside the Business Entity form listed on the [Associated Forms](#) page. (NOTE: Contact information entered previously is copied onto this page.)
2. Click **Add Contact Address** on the [Contact Details>Business Contact Details](#) page.
3. Select **Address Type>Mailing** on the [Contact Address Information](#) page. Enter required fields for the business entity. Click **Save and Close**, then click **Continue**.
4. Enter required fields in the Custom Fields section (Business Info and Non-Profit Info subsections) on the [Business Information>Business Information](#) page.
5. Scroll down to [State Corporation Commission](#) section. If selecting **Yes** to the first question, provide the existing SCC Entity ID. Search results will return with related records. Enter remaining required fields. Click **Continue Application**.
6. Click **Add** on the [Attachments](#) page.
7. Click **Add** on the [File Upload](#) page.
8. Navigate to the file and click **Open** to attach all required files. Click **Continue**.
9. Select **Type** and enter **Description** for all files on the [Attachments](#) page. Click **Save** then **Continue Application**.

10. Review information on the [Review](#) page. Accept certification at the bottom of the page. Click **Continue Application**.
11. Proceed to next form listed on the [Associated Forms](#) page. Proceed to one of the following sections based on the forms listed.

Individual Entity Form	Add an Individual Entity
Application	Submit an Application

Add an Individual Entity

1. Click **Open** beside the Individual Entity form listed on the [Associated Forms](#) page. (NOTE: Contact information entered previously is **not** copied to this page.)
2. Click **Edit** under the Individual Entity name on the [Associated Individual>Contact Information](#) page.
3. Click **Add Contact Address** on the [Contact Details>Business Contact Details](#) page.
4. Enter required fields on the [Contact Information](#) page. Scroll down and click **Add Contact Address**.
5. Select **Address Type>Mailing** on the [Contact Address Information](#) page. Enter required fields. Click **Save and Close**, then click **Continue**.
6. Click **Continue Application** after reviewing information on the [Associated Individual>Contact Information](#) page.
7. Enter required fields for Personal Data, Organizational Relationships, and Background Data sections on the [Associated Individual>Contact Details](#) page. If applicable, complete Custom Lists and Criminal Offenses. Click **Continue Application**.
8. Click **Add** on the [Attachments](#) page.
9. Click **Add** on the [File Upload](#) page.
10. Navigate to the file and click **Open** to attach all required files. Click **Continue**.
11. Select **Type** and enter **Description** for all files on the [Attachments](#) page. Click **Save** then **Continue Application**.
12. Review information on the **Review** page. Accept certification at bottom of page. Click **Continue Application**.
13. Proceed to the application on the **Associated Forms** page.

Submit an Application

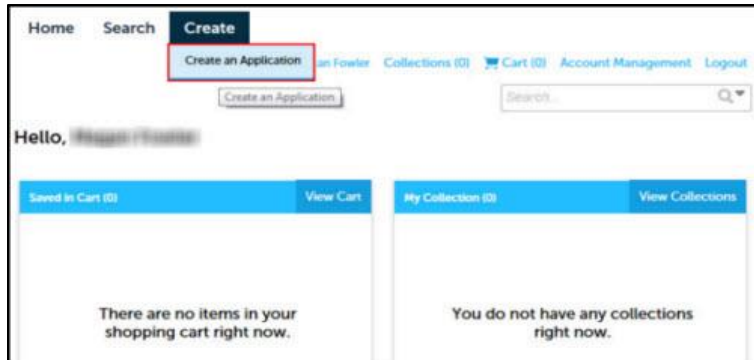
1. Click **Open** to launch the application form.
2. Verify the address on the [Review>Business Location](#) page. Complete **Establishment Info** section then click **Continue Application**.
3. Review information on [Review>Contact](#) page then click **Continue Application**.
4. Complete required fields on the [Application Information](#) page then click **Continue Application**. (NOTE: Questions vary by license type.)

5. Complete required fields on [Application Information>License Details](#) page. Click **Continue Application**.
6. If prompted, enter **Delivery or Keg** information then click **Continue Application**.
7. Click **Add** on the [Attachments](#) page.
8. Click **Add** on the [File Upload](#) page.
9. Navigate to the file and click **Open** to attach all required files. Click **Continue**.
10. Select **Type** and enter **Description** for all files on the [Attachments](#) page. Click **Save** then **Continue Application**.
11. If desired, add Comments then click **Continue Application**.
12. Review information on the **Review** page. Accept certification at bottom of page. Click **Continue Application**.
13. Click **Continue to Payment** on the Associated Forms page.
14. Review Fees then click **Check Out**.
15. Click **Checkout** on the [Cart](#) page.
16. Click **Proceed with Payment** on the [Payment](#) page.
17. Enter [Payment](#) then click **Submit Payment**. Application record numbers are listed after payment is processed.

END OF WRITTEN INSTRUCTIONS

SCREEN HELP

Create>Create Application



[Back to Instructions](#)

General Disclaimer

Online Application

Welcome to Virginia ABC's Online Permitting System. Using this system you can submit and update information, pay fees, schedule inspections, track the status of your application, and print your final record all from the convenience of your home or office, 24 hours a day.

Please "Allow Pop-ups from This Site" before proceeding. You must accept the General Disclaimer below before beginning your application.

General Disclaimer

Virginia ABC provides the Web information contained herein as a service to the public. While Virginia ABC attempts to maintain Web information that is accurate and timely, Virginia ABC neither warrants nor makes representations as to the functionality or condition of this Web site, its suitability for use, freedom from interruptions or from computer virus, or non-infringement of proprietary rights. Web materials have been compiled from a variety of sources and are subject to change without notice from Virginia ABC as a result

☐ I have read and accepted the above terms.

[Continue Application »](#)

[Back to Instructions](#)

Licenses>Apply for a Privilege

Select a Record Type

Choose one of the following available record types. For assistance or to apply for a record type not listed below please contact us.

Licenses (Privileges): Retail and Industry businesses
Permits: Special circumstances for Retail and Industry licenses
Events: Social occasions where alcohol may be sold or served – not for personal monetary gain (Wedding/Anniversary receptions use "Banquet"). For further definitions of event types, please go to <https://www.abc.virginia.gov/licenses/get-a-license/definitions>

[Search](#)

☒ Licenses
☐ Apply for a Privilege
☐ PIN Record

▶ Permits
▶ Events

[Continue Application »](#)

[Back to Instructions](#)

License Information>Available Applications

Step 1: License Information > Available Applications
Please review [website](#) to determine which license you need.

* indicates a required field.

Retail Applications

LICENSE INFO

What is the type of retail business conducted at the establishment? :

--Select--

Industry Applications

INDUSTRY APPLICATION TYPES

Brewery:

--Select--

Distillery:

--Select--

Farm Winery:

--Select--

Specialty:

--Select--

Winery:

--Select--

[Back to Instructions](#)

License Information>Shipper Applications

Apply for a Privilege

1 License Information	2 Contact Information	3 Review	4 Associated Forms	5 Record Issuance
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Step 1: License Information > Shipper Applications
The shipper's license can be attached to a retail privilege and/or an industry privilege. If you need further clarification please contact Virginia ABC Compliance unit <https://www.abc.virginia.gov/enforcement/bureau-of-law-enforcement/compliance-unit>

* indicates a required field.

Shipper Application

SHIPPER

Shipper:

--Select--

In State Shipper

Out of State Shipper

[Continue Application »](#) [Save and resume later](#)

[Back to Instructions](#)

License Information>COOP

Apply for a Privilege

1 License Information	2 Contact Information	3 Review	4 Associated Forms	5 Record Issuance
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Step 1: License Information > COOP
§ 4.1-212 A. 16 of the Code of Virginia states: Any person who, through contract, lease, concession, license, management or similar agreement (hereinafter referred to as the contract), becomes lawfully entitled to the use and control of the premises of a person licensed by the Board to continue to operate the establishment to the same extent as a person holding such licenses, provided such person has made application to the Board for a license at the same premises. The permit shall (i) confer the privileges of any licenses held by the previous owner to the extent determined by the Board and (ii) be valid for a period of 120 days or for such longer period as may be necessary as determined by the Board pending the completion of the processing of the permittee's license application. No permit shall be issued without the written consent of the previous licensee. No permit shall be issued under the provisions of this subdivision if the previous licensee owes any state or local taxes, or has any pending charges for violation of this title or any Board regulation, unless the permittee agrees to assume the liability of the previous licensee for the taxes or any penalty for the pending charges. An application for a permit may be filed prior to the effective date of the contract, in which case the permit when issued shall become effective on the effective date of the contract. Upon the effective date of the permit, (a) the permittee shall be responsible for compliance with the provisions of this title and any Board regulation and (b) the previous licensee shall not be held liable for any violation of this title or any Board regulation committed by, or any errors or omissions of, the permittee.

* indicates a required field.

Custom Fields

COOP

* Are you assuming or continuing operation of an existing Virginia ABC licensed establishment (COOP):

☐ Yes ☐ No

[Continue Application »](#) [Save and resume later](#)

[Back to Instructions](#)

License Information>Business Location

1 License Information 2 Contact Information 3 Review 4 Associated Forms 5 Record Issuance

Step 1: License Information > Business Location * indicates a required field.

Address

* Street No.: Direction: * Street Name: * Street Type: Street Suffix:

Unit No.: Unit # (end): Unit Type:

Facility or Establishment Name:

* City: * State: * Zip:

County: * Country:

X Coordinate: Y Coordinate:

[Clear](#)

[Continue Application >](#) [Save and resume later](#)

[Back to Instructions](#)

Contact Information>Business Contact Details (Business Entity Section)

Step 2: Contact Information > Business Contact Details * indicates a required field.

Business Entity

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

[Select from Account](#) [Add New](#)

Contact

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

[Select from Account](#) [Add New](#)

Authorized Representative

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

[Select from Account](#) [Add New](#)

[Continue Application >](#) [Save and resume later](#)

[Back to Instructions](#)

Contact Information Organization

Contact Information

* Individual/Organization: **The Business Entity contact needs to be Organization** FEIN: * Preferred Method of Contact:

* Organization Name: * Primary Phone:

DBA/Trade Name: Secondary Phone:

First: Last: SSN or ITIN: Personal Phone:

* E-mail: Driver's License Number: Driver's License State:

State ID Number: State:

Birth Date: Gender: ☐ Female ☐ Male

[Add Contact Address](#)

To edit a contact address, click the address link.

[Back to Instructions](#)

Contact Details>Business Contact Details (Add Contact Address)

Step 1: Contact Details > Business Contact Details * indicates a required field.

Business Entity


To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

Pubs
joe.smith@abc.gov
Home phone:
Mobile Phone:
Work Phone: 8045556932
Fax:
[Edit](#) [Remove](#)

▼ **Contact Addresses**

[Add Contact Address](#)

To edit a contact address, click the address link.
Required contact address type(s): Mailing

 **Required contact address type(s): Mailing.**

Showing 0-0 of 0

Address Type	Recipient	Address	Action
No records found.			

[Continue Application](#) [Back to Associated Forms](#) [Save and resume later](#)

[Back to Instructions](#)

Contact Address Information

Contact Address Information ×

Address Type:

Street No: Direction: Street Name: * Street Type: Street Suffix:

Unit No: Unit # (end): Unit Type:

City: * State: * ZIP Code: *

Country/Region:

[Save and Close](#) [Save and Add Another](#) [Clear](#) [Discard Changes](#)

[Back to Instructions](#)

Contact Information>Business Contact Details (Contact Section)

Step 2: Contact Information > Business Contact Details * indicates a required field.

Business Entity

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

✔ **Contact added successfully.**

ABC
joe.smith@abc.gov
Home phone:
Mobile Phone:
Work Phone: 8046665921
Fax:
[Edit](#) [Remove](#)

▼ **Contact Addresses**

[Add Contact Address](#)

To edit a contact address, click the address link.
Required contact address type(s): Mailing

Showing 1-1 of 1

Address Type	Recipient	Address	Action
Mailing		Main ST, Richmond VA 20220 United States	Actions ▼

Contact

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

[Select from Account](#) [Add New](#)

[Back to Instructions](#)

Contact Information

☐ Individual/Organization: **Select Individual**
☐ FEIN:

☐ Preferred Method of Contact: --Select--

Individual

Organization Name
☐ Primary Phone:

DBA/Trade Name:
☐ Secondary Phone:

☐ First:
☐ Middle:
☐ Last:
☐ Suffix:

Personal Phone:
☐ SSN or ITIN:
☐

☐ E-mail:

Driver's License Number:
☐ Driver's License State: --Select--

State ID Number:
☐ State: --Select--

☐ Birth Date:
☐ Gender: ☐ Female ☐ Male

☐ Are you applying on behalf of a group or company: ☐ Yes ☐ No

What is the applicant's relationship to the company, sponsoring organization or group?:

Contact Information>Entity Hierarchy

[Back to Instructions](#)

Entity Relationships

You will be required to provide necessary information about the structure of the Primary Business Entity applying for the privilege, including its ownership by other companies and personal data of individuals associated with it.

- If SOLE PROPRIETOR /GENERAL PARTNERSHIP applying for the privilege:
- Add a row for each person owner / partner (Type= Individual).
- If LP, LLP, LLC or CORPORATION that encompasses the Business Entity with 10% or more interest applying for the privilege:
- Add a row for each Business Entity (Type = Business Entity) AND
- Add a row for each person associated to that Business Entity (Type= Individual Entity).
- Member/managers and all other members with 10 percent or more interest FLP, LLP or LLC.
- Officers, directors and all stockholders owning 10 percent or more of corporation's stock if CORPORATION.
- If ASSOCIATION or TAX-EXEMPT PRIVATE CLUB
- Add a row for each Officers, directors and trustee associated to that Association or private Club (Type= Individual Entity).

At least one Individual needs to be added. Ensure a Social Security Number, Driver's License, or State ID is supplied.

Type:	FEIN:	Business Name:
--Select--		
Social Security Number:	Driver's License Number:	Driver's License State:
State ID:	State:	First Name:
Last Name:	Relationship:	Percentage Owned:
	--Select--	
Relationship Status:		
Active		
Submit		

Page 10 of 17

Review

1	2	3	4	5	6
License Information	Contact Information	Review	Associated Forms	Pay Fees	
Step 3: Review					
Continue Application » Save and resume later					
Please review all information below. Click the "Edit" buttons to make changes to sections or "Continue Application" to move on.					
Record Type					
Apply for a Privilege					
Retail Applications					
LICENSE INFO Edit					
What is the type of retail business conducted at the establishment? : Boat					
Industry Applications					
INDUSTRY APPLICATION TYPES Edit					
Brewery:					
Distillery:					
Farm Winery:					
Specialty:					
Winery:					
Importer and Wholesaler Applications					

[Back to Instructions](#)

Associated Forms

1	2	3	4	5	6
License Information	Contact Information	Review	Associated Forms	Pay Fees	Record Issuance
Step 4: Associated Forms					
Additional Information					
Listed below are the items added to this record. You must fill out an associated form for each item before this record can be submitted.					
Added Items:					
Business Entity ABC Open Remove					
Individual Entity Open Remove					
Retail Carrier Application Open Remove					
Continue to Payment » Save and resume later					

[Back to Instructions](#)

Business Information>Business Information

1	2	3	4	5
Contact Details	Business Information	Documents	Review	Associated Forms
Step 2: Business Information > Business Information				
* Indicates a required field.				
Custom Fields				
BUSINESS INFO				
* Is this business entity owned by another entity?: ?				
<input type="radio"/> Yes <input type="radio"/> No				
* Were stock certificates issued?:				
<input type="radio"/> Yes <input type="radio"/> No				
Is the business entity an out of state entity?:				
<input type="radio"/> Yes <input type="radio"/> No				
If yes, is this business entity registered with the Virginia State Corporation Commission?:				
<input type="radio"/> Yes <input type="radio"/> No				
NON PROFIT INFO				
* Does the group/entity hold IRS tax-exempt status?: ?				
<input type="radio"/> Yes <input type="radio"/> No				
Nonprofit Tax Exemption Status: ?				
--Select--				
Is this business a subordinate of a national nonprofit?:				
<input type="radio"/> Yes <input type="radio"/> No				

[Back to Instructions](#)

Business Information>State Corporation Commission

STATE CORPORATION COMMISSION

*Do you have a State Corporation Commission Entity ID Number?:
☐ Yes ☐ No

*Legal Business Structure:
--Select--

State Corporation Commission Entity ID Number:

Virginia Sales and Use Tax Account Number:

Legal Business Name:

Additional State Corporation Commission Info:

*Is the above information accurate?:
☐ Yes ☐ No

[Continue Application »](#) [« Back to Associated Forms](#)

[Back to Instructions](#)

Attachments

Business Entity

1 Contact Details

2 Business Information

3 Documents

4 Review

5 Associated Forms

Step 3: Documents>Attachments

* indicates a required field.

Attachment

The maximum file size allowed is 16 MB.
html; htm; mht; mhtml are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
No records found.				

[Select from Account](#) [Add](#)

[Continue Application »](#) [« Back to Associated Forms](#) [Save and resume later](#)

[Back to Instructions](#)

File Upload

File Upload

The maximum file size allowed is 16 MB.
html; htm; mht; mhtml are disallowed file types to upload.

[Continue](#) [Add](#) [Remove All](#) [Cancel](#)

[Back to Instructions](#)

Attachments – Type and Description

Attachment * indicates a required field

The maximum file size allowed is 16 MB.
html, htm, mht, mhtml are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
No records found.				

* Type: [Remove](#)

File: attachment.docx
100%

* Description:

Also Attach To:

[Save](#) [Select from Account](#) [Add](#) [Remove All](#)

[Continue Application »](#) [Save and resume later](#)

[Back to Instructions](#)

Attachment

Attachment

The maximum file size allowed is 16 MB.
html, htm, mht, mhtml are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
No records found.				

* Type: [Remove](#)

File: Sample.docx
100%

* Description:

Also Attach To:

[Save](#) [Select from Account](#) [Add](#) [Remove All](#)

[Continue Application »](#) [Back to Associated Forms](#) [Save and resume later](#)

[Back to Instructions](#)

Review (Business Entity Form)

Step 4: Review

[Continue Application »](#) [Back to Associated Forms](#) [Save and resume later](#)

Please review all information below. Click the "Edit" buttons to make changes to sections or "Continue Application" to move on.

Record Type

Business Entity

Business Entity [Edit](#)

Organization: Happy Place
Primary Phone: 8045553695
E-mail: happy.place@abc.gov
Preferred Method of Contact

Custom Fields

BUSINESS INFO [Edit](#)

Is this business entity owned by another entity?: No

Were stock certificates issued?: No

Is the business entity an out of state entity?: No

If yes, is this business entity registered with the Virginia State:

[Back to Instructions](#)

Review (Business Entity Form>Certification)

I certify that I am the applicant and that all information provided on this application is true and correct. I understand that falsification and/or misrepresentation of information may result in refusal of a license and/or criminal charges, which may include the Class 5 felony of perjury. By checking the checkbox below, I also acknowledge that I am responsible to pay all fees associated with this application and give Virginia ABC authorization to charge me according to the terms outlined above.

☐ By checking this box, I agree to the above certification.

Date:

[Continue Application »](#) [« Back to Associated Forms](#) [Save and resume later](#)

[Back to Instructions](#)

Associated Individual>Contact Information

1 Associated Individual


2 Supporting Documents

3 Review

Step 1: Associated Individual > Contact Information

Individual Entity

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

 **An error has occurred.**
Some of the required fields have not been completed.
Please edit the contact and complete the required information.

Joe Smith
Home phone:
Mobile Phone:
Work Phone:
Fax:
[Edit](#) [Remove](#)

▼ **Contact Addresses**

[Add Contact Address](#)

To edit a contact address, click the address link.
Required contact address type(s): Mailing


[Back to Instructions](#)

Associated Individual>Contact Information (Continue Application)

Step 1: Associated Individual > Contact Information * indicates a required field.

Individual Entity

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

 **Contact updated successfully.**

Sally Johnson
sally.johnson@abc.gov
Home phone:
Mobile Phone:
Work Phone: 80402226666
Fax:
[Edit](#) [Remove](#)

▼ **Contact Addresses**

[Add Contact Address](#)

To edit a contact address, click the address link.
Required contact address type(s): Mailing

Showing 1-1 of 1

Address Type	Recipient	Address	Action
Mailing		oak ST, richmond va 23220 United States	Actions ▼

[Continue Application »](#) [« Back to Associated Forms](#) [Save and resume later](#)

[Back to Instructions](#)

Associated Individual>Contact Details

Step 1: Associated Individual > Contact Details * indicates a required field.

Personal Data

Personal Data

* Is this individual a Virginia resident?:
☒ Yes ☐ No

* I have resided in Virginia for past 12 months:
☒ Yes ☐ No

How long has this individual resided in Virginia in years and months?:
IE: 3 yrs, 2 months

* Is this individual currently or in past 12 months resided in Alabama, California, Arizona, or another country?:
☒ Yes ☐ No

* Is this individual a U.S. Citizen?:
☒ Yes ☐ No

* Does this individual hold public office?:
☒ Yes ☐ No

Enter the title of the office and location where it is held:

Organizational Relationships

ORGANIZATION RELATIONSHIP INFO

[Back to Instructions](#)

Review>Business Location

Step 1: Review > Business Location * indicates a required field.

Address

* Street No.: 555 Direction: --Select-- * Street Name: main * Street Type: ST Street Suffix: --Select--

Unit No.: Unit # (end): Unit Type: --Select--

Facility or Establishment Name: *
Happy Place

* City: Richmond * State: VA * Zip: 23220-

County: Country: United States

X Coordinate: Y Coordinate:

Search Clear

[Back to Instructions](#)

Review>Contact

Step 1: Review > Contact * indicates a required field.

Business Entity

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

Happy Place
happy.place@abc.gov
Home phone:
Mobile Phone:
Work Phone: 8045553695
Fax:
[Edit](#)

▼ **Contact Addresses**

To edit a contact address, click the address link.
Required contact address type(s): Mailing

Showing 1-1 of 1

Address Type	Recipient	Address	Action
Mailing		555 Main ST, Richmond VA 23220 United States	

[Back to Instructions](#)

Application Information

Step 2 : Application Information > Specialty Establishment * Indicates a required field.

Alcohol Information

ALCOHOL INFO

* Where will the alcohol be consumed?:
--Select--

Beer:
☐ Temporary Beer:

Wine:
☐ Temporary Wine:

Mixed beverages - on premises only:
☐ Temporary Mixed Beverages - On Premises Only:

Temporary Privilege Expiration:

Hours of Operation

DAYS AND HOURS OF OPERATION

* Date which you began or will begin operation of business:

[Back to Instructions](#)

Application Information>License Details

Step 2 : Application Information > License Details

License Information

LOCATION INFO

* Do you own or lease the location of the establishment?:
Owned

What is the name of the landlord?:

Landlord address:

Landlord phone:

* Is the parking lot private or shared?:
Shared

* Interior square footage to be licensed:

* Patio square footage to be licensed:

[Back to Instructions](#)

Pay Fees

Home Search Create

Logged in as: Collections (0) Cart (4) Account Management Logout

If you require more information regarding Virginia ABC, Please [Click Here](#)

Banquet Application

1	2	3	4 Supporting Documents	5 Comments for the Agency	6 Review	7 Pay Fees	8 Record Issuance
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Step 7: Pay Fees

Listed below are the fees due based upon the information you've entered. Some fees are pro-rated and will result in a reduced amount being charged. The following screen will display your total fees.

Application Fees

Fees	Calculation	Amount
Application Fee - Banquet Event	1	\$15.00
Banquet Event License Fee	1	\$40.00

TOTAL FEES: \$55.00
If you have questions regarding the fees, please contact your Regional ABC Office.

[Back to Instructions](#)

Cart

Cart

1 Select item to pay

2 Payment information

3 Receipt/Record issuance

Step 1: Select item to pay

Please click on edit cart to save fees for later.

PAY NOW

555 main ST, Richmond VA 23220 United States

2 Application(s) | \$195.00

Apply for a Privilege
20TMP-001375

Total due: \$0.00

► Retail Specialty Establishment Application
20TMP-001382

Total due: \$195.00

No Address

2 Application(s) | \$0.00

Business Entity
20TMP-001380

Total due: \$0.00

Individual Entity
20TMP-001381

Total due: \$0.00

Total amount to be paid: \$195.00

Note: This does not include additional inspection fees which may be assessed later.


Checkout »

Edit Cart »

Continue Shopping »

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Payment



Order Section

Amount

210.00 USD

PROCEED WITH PAYMENT

By placing this order, you are indicating you agree with our return and refund policy.
<https://www.abc.virginia.gov/stores/store-information/return-policy>

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Submit Payment

Order Section

Amount

210.00 USD

Name and Zip


First Name
Susan

Last Name
Smith

Postal code

Payment

PAYMENT CARD




Card Number *

Expiration date (MM/YY) *

Security code *

SUBMIT PAYMENT

By placing this order, you are indicating you agree with our return and refund policy.
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